

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ms. Katherine H. Huebert

Mailing Address 294 Robinwood Circle

City State Zip Code
Reedley CA 93654-2767

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.30

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 31 2015

Transaction ID : PR207013406

Amount of Each Receipt this Period

83.33

P/R Deduction (\$83.33 Monthly)

Full Name (Last, First, Middle Initial)

B. Mr. William V. Brody

Mailing Address 19 Corte Miguel

City State Zip Code
San Rafael CA 94903-1810

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 31 2015

Transaction ID : PR207813406

Amount of Each Receipt this Period

250.00

P/R Deduction (\$250.00 Monthly)

Full Name (Last, First, Middle Initial)

C. Mr. Michael C. Hettenbach

Mailing Address 1505 Haviland Court

City State Zip Code
Clayton CA 94517-1064

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance Company

Occupation
Senior Associate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 31 2015

Transaction ID : PR208013406

Amount of Each Receipt this Period

30.00

P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

363.33